

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

AGA TRADE ASSOCIATION INC PAC

ADDRESS (number and street)

4720 Montgomery Lane Suite 430

☐Check if different
than previously
reported. (ACC)

Bethesda

MD

20814

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00423228

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Damian H. Augustyn, MD

Signature of Treasurer Electronically Filed by Damian H. Augustyn, MD

Date

01

29

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
AGA TRADE ASSOCIATION INC PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		44356.70
(b) Cash on Hand at Beginning of Reporting Period	45866.90	
(c) Total Receipts (from Line 19)	39030.00	69540.20
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84896.90	113896.90
7. Total Disbursements (from Line 31)	19000.00	48000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	65896.90	65896.90
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AGA TRADE ASSOCIATION INC PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	27300.00	53700.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	11730.00	15585.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	39030.00	69285.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	39030.00	69285.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	255.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	39030.00	69540.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39030.00	69540.20

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	48000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19000.00	48000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19000.00	48000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	39030.00	69285.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39030.00	69285.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

John I. Allen

Mailing Address 8067 Kentucky Ave S

City

Bloomington

State

MN

Zip Code

55438-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Minnesota Gastroenterology

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: C349249

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

James M. Anderson

Mailing Address 6312 MBRB - Physiology
Campus Box 7545

City

Chapel Hill

State

NC

Zip Code

27599-7545

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNC

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: C349250

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Purma Atturi, MD

Mailing Address 19 Wheatley Ave

City

Albertson

State

NY

Zip Code

11507

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNY Health Science center
at Brook

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: C387470

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Richard McGuire Auld, Jr.

Mailing Address 1200 Sonoma Ave
Suite One

City State Zip Code
Santa Rosa CA 95405-6664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gastroenterologist Assoc
of Sonoma Cou

Occupation
Gastroenterologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C367335

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ho S. Bae, MD

Mailing Address 844 Chula Vista Ave

City State Zip Code
Pasadena CA 91103-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351763

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Kim E. Barrett

Mailing Address University Center 303, GI Division
9500 Gilman Drive - 0063

City State Zip Code
La Jolla CA 92093-0063

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCSD

Occupation
PhD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 7

Transaction ID: C347733

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Theodore M Bayless

Mailing Address 2206 South Road

City

Baltimore

State

MD

Zip Code

21209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johns Hopkins Univ

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: C368843

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Kambiz Bral

Mailing Address 4970 Brookdale Road

City

Bloomfield Hills

State

MI

Zip Code

48304-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: C373558

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William C. Bray

Mailing Address 2025 Frontis Plaza Blvd
Suite 200

City

Winston Salem

State

NC

Zip Code

27103-5663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Health Special-
ists

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C366917

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Margaret E. Bridges

Mailing Address 6560 Fannin St
#1404

City State Zip Code
Houston TX 77030-2761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: C376301

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Joel V. Brill

Mailing Address 6602 E. Gold Dust Av

City State Zip Code
Scottsdale AZ 85253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Predictive Health

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: C376008

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ronald J. Brzana

Mailing Address 106 Woodview Dr

City State Zip Code
Hollidaysburg PA 16648-9281

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blair Gastroenterology As-
soc.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: C379668

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Norman Mattock Callahan, III

Mailing Address 2415 Wayland Rd
Suite 332

City State Zip Code
Berwyn PA 19312-2140

FEC ID number of contributing
federal political committee.

C

Name of Employer
M.L.G.A.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C351808

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Roger Chapman Camp

Mailing Address 7777 Forest Ln
Suite C340

City State Zip Code
Dallas TX 75230-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dallas Diagnostic Assoc

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: C379665

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Michael J. Cassidy

Mailing Address 51 Paige Tril

City State Zip Code
Perkasie PA 18944-2646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Buxmont G.I. Assoc.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C351833

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 11 / 39

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Peter Donaldson

Mailing Address 5730 Meadow Ln.

City

Pfafftown

State

NC

Zip Code

27040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Health Special-
ists

Occupation

Physician Practice Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C376360

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Douglas David Dykman, MD

Mailing Address 907 Stonington Ct

City

Arnold

State

MD

Zip Code

21012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anne Arundel Gastrology
Associates, PA

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: C366996

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Richard Alan Edgin, MD

Mailing Address 4320 Woodhall Road

City

Columbus

State

OH

Zip Code

43220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio Gastroenterology Gro-
up, Inc

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: C374910

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Ronald P. Fogel

Mailing Address 30795 23 Mile Road, Suite 207

City

Chesterfield

State

MI

Zip Code

48047-5720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Health Center
of Michigan

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C367334

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James W. Freston

Mailing Address 12 BuffleHead Drive

City

Kiawah Island

State

SC

Zip Code

29455-5737

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ of Conn.

Occupation
MD, PhD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 0 7

Transaction ID: C343858

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Lisa M. Gangarosa, MD

Mailing Address 105 Sunset Ridge Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of North Carol-
ina

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Transaction ID: C368863

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Leslie P. Goldman

Mailing Address 245 Alvord Park Rd
B

City State Zip Code
Torrington CT 06790-3468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Litchfield County Gastro
Assoc.

Occupation
Gastroenterologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C366915

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rakesh K Gupta

Mailing Address 1501 Wabash St
Suite 303

City State Zip Code
Michigan City IN 46360

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C352560

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Osama Haikal, MD

Mailing Address 2136 E Desert Inn Rd # A

City State Zip Code
Las Vegas NV 89109-3247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C366910

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Robert J. Hally

Mailing Address 4660 Kenmore Ave
Suite 305

City State Zip Code
Alexandria VA 22304-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Disease Physi-
cians

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: C373579

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Stephen W. Hiltz

Mailing Address 604 Rosemont Ave

City State Zip Code
Park Hills KY 41011-2831

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351773

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Seth D. Hoffman

Mailing Address 1341 S Indiana Ave
Unit B

City State Zip Code
Chicago IL 60605-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Univ/Mcgaw
Med CT

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: C368867

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Courtney W. Houchen

Mailing Address 920 Stanton L Young Blvd
WP 1360

City State Zip Code
Oklahoma City OK 73104-5020

FEC ID number of contributing
federal political committee.

C

Name of Employer
OUHSC

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: C349254

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Peter J. Kahrilas

Mailing Address 676 N St. Clair St
Suite 1400

City State Zip Code
Chicago IL 60611-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: C347734

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David Russell Kalman, MD

Mailing Address 33 Ellington Street

City State Zip Code
Longmeadow MA 01106-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Springfield Medical Assoc

Occupation
Physicians

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351768

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Kent Katz

Mailing Address 991 Stafford

City

Casper

State

WY

Zip Code

82609

FEC ID number of contributing
federal political committee.

C

Name of Employer
GI Associates

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: C368921

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Emmet B. Keefe, MD

Mailing Address 750 Welch Road
Suite 210

City

Palo Alto

State

CA

Zip Code

94304-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stanford Univ. Medical Ce-
nter

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: C352568

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Barry Kisloff, MD

Mailing Address 176 Thorberry Road

City

Pittsburgh

State

PA

Zip Code

15235

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 7

Transaction ID: C343863

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Joseph W. Kittinger

Mailing Address 5115 Oleander Drive

City

Wilmington

State

NC

Zip Code

28403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wilmington Gastroenterolo-
gy

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C352574

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Lawrence R. Kosinski

Mailing Address 745 Fletcher Drive, Suite 202

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elgin Gastroenterology

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 6 / 2 0 0 7

Transaction ID: C345434

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

John Thomas LaMont

Mailing Address East Campus, Dana 501
330 Brookline Avenue, GI Division

City

Boston

State

MA

Zip Code

02215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harvard Medical Faculty
Physicians

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: C373549

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Nicholas F. LaRusso

Mailing Address 1701 Guggenheim Building
200 First Street SW

City State Zip Code
Rochester MN 55905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mayo Clinic College of Med

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: C349252

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

John C. Lee

Mailing Address 8220 Walnut Hill Lane
Suite 214 LB101

City State Zip Code
Dallas TX 75231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Health Assoc of
Texas

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351755

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Henry Levine

Mailing Address 1817 N Mills Ave

City State Zip Code
Orlando FL 32803-1853

FEC ID number of contributing
federal political committee.

C

Name of Employer
Center for Digestive Heal-
th

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: C376003

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Andrew G. Libertin

Mailing Address 2726 Fulton Dr NW

City

Canton

State

OH

Zip Code

44718-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gastroenterology Special-
ists IncOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: C376309

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Charles J. Lightdale

Mailing Address 100 Glenwood Avenue

City

Leonia

State

NJ

Zip Code

07605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia UniversityOccupation
Professor of Clinical Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 0 7

Transaction ID: C343993

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Bradley P. Mackler

Mailing Address 924 Middleford Rd

City

Seaford

State

DE

Zip Code

19973-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nanticoke GastroenterologyOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: C351839

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Frank V Meriano

Mailing Address 6560 Fannin St
Suite 1008

City State Zip Code
Houston TX 77030-2761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: C351819

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Frank V Meriano

Mailing Address 6560 Fannin St
Suite 1008

City State Zip Code
Houston TX 77030-2761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: C373522

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

James M. Mertesdorf

Mailing Address 1515 Doctors Circle
Bldg A

City State Zip Code
Wilmington NC 28401-7403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hanover Medical Specialis-
ts

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: C373544

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Howard R. Mertz

Mailing Address 3113 Forrest Park Ave

City

Nashville

State

TN

Zip Code

37215-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C352579

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Weinstein L Michael

Mailing Address 9210 Potomac School Dr

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Gastroentero-
logy Group

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 7

Transaction ID: C346437

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Richard G. Mitchell

Mailing Address 7605 Forest Avenue
Ste. #211

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Independent Assoc, Inc

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C352576

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Carol S. Murakami

Mailing Address 2221 94th Ave. NE

City

Clyde Hill

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Minor and James MedicalOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	7

Transaction ID: C372754

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Sreenivasa R Nakka, MD

Mailing Address 949 Calhoun Place
Suite A

City

Hemet

State

CA

Zip Code

92543

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	7

Transaction ID: C351765

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Vincent S. Panella

Mailing Address 420 Grand Avenue

City

Englewood

State

NJ

Zip Code

07631-4141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Englewood Endoscopic AssocOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	7

Transaction ID: C351805

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Mahendra Patel, MD

Mailing Address 10515 Balboa Bl.
Suite 380

City State Zip Code
Granada Hills CA 91344

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: C373565

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

James H. Petersen

Mailing Address 200 Brevco Plz
Suite #208

City State Zip Code
Lake Saint Louis MO 63367-2947

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Disease Medical
Consultants

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351766

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David L. Pleet

Mailing Address 70 Bellevue Avenue

City State Zip Code
Springfield MA 01108-1742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Springfield Medical Assoc-
iation

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C367333

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Ernest Francis Ribera, III

Mailing Address 50 South San Mateo Drive
Suite 330

City State Zip Code
San Mateo CA 94401-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: C373516

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Suzanne Rose

Mailing Address Annenberg Bld Rm 13-34, Box 1257
One Gustave L. Levy Place

City State Zip Code
New York NY 10029-6574

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mnt Sinai Med Center

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: C373593

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Soraya A. Ross, MD

Mailing Address 465 N Roxbury Dr
Suite 715

City State Zip Code
Beverly Hills CA 90210-4206

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation
doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C373582

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 39

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Anil K. Rustgi

Mailing Address 415 Curie Boulevard

600 Clinical Research Building

City

Philadelphia

State

PA

Zip Code

19104-6140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ of PA School of Medi-
cine

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351760

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Stephen G. Sackel

Mailing Address 5601 North Dixie Highway

Ste 405

City

Fort Lauderdale

State

FL

Zip Code

33334-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Care

Occupation

Gastroenterologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: C351826

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

You Sung Sang, MD

Mailing Address 79 Wawecus St

Suite 101

City

Norwich

State

CT

Zip Code

06360-2160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norwich GI Associates, PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: C373600

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Edwin C. Schafer

Mailing Address 3875 S 177th Ave

City

Omaha

State

NE

Zip Code

68130-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midwest Gastrointestinal
Associates

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351753

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Stephen A. Schmidt

Mailing Address 300 West Lincoln
Suite 402

City

Belleville

State

IL

Zip Code

62220-1987

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C352583

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

David S. Shields

Mailing Address 770 Welch Rd
Ste 250

City

Palo Alto

State

CA

Zip Code

94304-1513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C366920

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Robert S Spira

Mailing Address 90 Brayton St

City

Englewood

State

NJ

Zip Code

07631-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C351810

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Paul M. Stoopack

Mailing Address 3777 Independence Ave
#12L

City

Bronx

State

NY

Zip Code

10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 7

Transaction ID: C348234

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

John B. Sturgeon

Mailing Address 8800 W 75th St
Suite 300

City

Overland Park

State

KS

Zip Code

66204-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Gastroenterologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: C368890

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Gerald L. Tarder

Mailing Address 130 Lacasa Via
Building 2, Suite 107

City State Zip Code
Walnut Creek CA 94598-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C351814

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James A. Taterka

Mailing Address 827 Hain Dr

City State Zip Code
Lafayette Hill PA 19444-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hillmart GI PC

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C373542

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Patrick Gerard Tempera

Mailing Address 2333 Morris Ave
Suite C1

City State Zip Code
Union NJ 07083-5714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: C351831

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Rodney L. Thomson

Mailing Address 145 Mission Ranch Blvd
Ste 115

City State Zip Code
Chico CA 95926-2175

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: C352571

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James D. Torosis

Mailing Address 1262 Nightingale Court

City State Zip Code
Los Altos CA 94024-6846

FEC ID number of contributing
federal political committee.

C

Name of Employer
Penninsula Gastroenterology Group

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: C352572

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Andrzej T. Triebeling

Mailing Address 1001 Southpark Drive

City State Zip Code
Littleton CO 80120-5641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arapahoe Gastroenterology

Occupation
physician

Receipt For:

2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C349182

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Bruce W. Trotman

Mailing Address 1829 Amberwynd Cir W

City

Palmetto

State

FL

Zip Code

34221-5642

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employed

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351770

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Timothy C. Wang

Mailing Address Irving Cancer Research Center
1130 Saint Nicholas Ave

City

New York

State

NY

Zip Code

10032-3802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: C349253

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Christoph T. Woerlein, MD

Mailing Address 1536 Rattlesnake Ct

City

Missoula

State

MT

Zip Code

59802-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Transaction ID: C367337

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Dennis V. Worthington

Mailing Address PO Box 157

City

Ruidoso

State

NM

Zip Code

88355-0157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ruidoso Gastroenterology

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: C351771

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Bruce Yacyshyn, MD

Mailing Address 8700 Mason-Montgomery Road
Box 2155

City

Cincinnati

State

OH

Zip Code

45040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Procter & Gamble Pharmace-
uticals

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: C373450

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Cynthia M. Yoshida

Mailing Address 902 E Jefferson St
Suite #201

City

Charlottesville

State

VA

Zip Code

22902-5397

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: C349251

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

Kenny S. Yung

Mailing Address 5507 Nettlecreek Ave NW

City

Massillon

State

OH

Zip Code

44646-9528

FEC ID number of contributing
federal political committee.

C

Name of Employer
GI Specialists

Occupation

MD

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	7

Transaction ID: C376313

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

27300.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

RANGEL FOR CONGRESS

Mailing Address PO Box 5577

City
New York

State
NY

Zip Code
10027

Purpose of Disbursement
Contribution

Candidate Name
Rep. Charles B. Rangel

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: D57032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

VAN HOLLEN FOR CONGRESS

Mailing Address 10537 St. Paul Street

City
Kensington

State
MD

Zip Code
20895

Purpose of Disbursement
Contribution

Candidate Name
Rep. Chris Van Hollen, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 08

Transaction ID: D54355

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

DAVE CAMP FOR CONGRESS 2008

Mailing Address 5915 EASTMAN AVE. SUITE 100

City
MIDLAND

State
MI

Zip Code
48640

Purpose of Disbursement
Contribution

Candidate Name
Rep. Dave Camp

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: D57023

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

AGA TRADE ASSOCIATION INC PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Contribution

Candidate Name
Rep. Henry A. Waxman

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 30

Transaction ID: D57035

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. MATHESON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 521048

City Salt Lake City State UT Zip Code 84152

Purpose of Disbursement
Contribution

Candidate Name
Rep. Jim Matheson

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 02

Transaction ID: D54353

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. JOHN D. DINGELL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 607 14th Street N.W.

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Rep. John D. Dingell

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: D57024

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A. Full Name (Last, First, Middle Initial)
KIND FOR CONGRESS COMMITTEE

Mailing Address 205 South 5th Ave

City State Zip Code
La Crosse WI 54601

Purpose of Disbursement
Contribution

Candidate Name
Rep. Ron J. Kind

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Transaction ID: D57022

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
BERKLEY FOR CONGRESS

Mailing Address 3069 Conquista Court

City State Zip Code
Las Vegas NV 89121

Purpose of Disbursement
Contribution

Candidate Name
Rep. Shelley Berkley

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: D54356

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
BEN CARDIN FOR CONGRESS

Mailing Address PO BOX 21093

City State Zip Code
Catonsville MD 21228

Purpose of Disbursement
Contribution

Candidate Name
Sen. Benjamin L. Cardin

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 00

Transaction ID: D54352

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A. Full Name (Last, First, Middle Initial)
FRIENDS OF GORDON SMITH

Mailing Address 228 S WASHINGTON STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
Sen. Gordon Smith

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 00

Transaction ID: D57033

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF MAX BAUCUS

Mailing Address PO BOX 586

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contribution

Candidate Name
Sen. Max Baucus

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District: 00

Transaction ID: D57029

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
COLEMAN FOR SENATE 08

Mailing Address 680 TRANSFER ROAD, SUITE A

City SAINT PAUL State MN Zip Code 55114

Purpose of Disbursement
Contribution

Candidate Name
Sen. Norm Coleman

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: D57027

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A. Full Name (Last, First, Middle Initial)
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement
Contribution

Candidate Name
Sen. Pat Roberts

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: D57028

Date of Disbursement

12 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF SHERROD BROWN

Mailing Address PO BOX 76187

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
Contribution

Candidate Name
Sen. Sherrod Brown

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: D54354

Date of Disbursement

09 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name
Sen. Susan M. Collins

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: D57034

Date of Disbursement

12 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AGA TRADE ASSOCIATION INC PAC

A.

Full Name (Last, First, Middle Initial)

CITIZENS FOR HARKIN

Mailing Address P O BOX 811

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Contribution

Candidate Name
Sen. Tom Harkin

Office Sought: ☐ House
☒ Senate
☐ President

State: IA

District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D57025

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

19000.00